### DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 07/28/2006

# **Provider Inspection Summary**

For the period 06/01/2003 to 05/31/2006 Community Based Residential Facility CLASS CNA (NONAMBULATORY) STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

## **Facility Information**

Facility Name: EVERGREEN TERRACE (410151)

Address: 1130 N WESTFIELD ST BOX 1720, OSHKOSH, WI 549031720

**License Status: REGULAR** 

Licensed/Certified/Registered 04/01/1984

Regional Office: NORTHEASTERN REGION (GREEN BAY), (920) 448-5240

Survey History								
Survey ID: 0096388	End Date: 02/16/2006	Type: OTHER	Purpose: COMPLAINT					
Results: NO STATEMENT OF DEFICIENCY ISSUED								
Survey ID: 0095774	End Date: 09/19/2005	Type: OTHER	Purpose: COMPLAINT					
Results: NO STATEMENT OF DEFICIENCY ISSUED								
Survey ID: 0094456	End Date: 03/22/2005	Type: OTHER	Purpose: SURVEY					
Results: NO STATEMENT OF DEFICIENCY ISSUED								
Survey ID: 0094500 End Date: 03/09/2005 Type: ABBREVIATED Purpose: SURVEY/COMPLAINT								
Results: STATEMENT OF DEFICIENCY ISSUED								
Statement of Deficiency: #10007137 Served 04/09/2005								
	<u>Deficiencies Cited</u> 83.41(4)(g)	Subject Area HUMIDITY SHALL BI	E COMFORTABLE	Compliance Verified 09/19/2005	Corrected Yes			

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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Complaint History						
Date Complaint Received: 01/27/2006	Date Investigation Completed: 02/16/2	2006				
Subject Area(s) ABUSE	Result NOT SUBSTANTIATED	<u>SOD #</u>				
PHYSICAL PLANTS & SAFETY HAZARDS	NOT SUBSTANTIATED					
Date Complaint Received: 09/13/2005	Date Investigation Completed: 09/19/2005					
Subject Area(s) PHYSICAL PLANTS & SAFETY HAZARDS	Result NOT SUBSTANTIATED	SOD#				
Date Complaint Received: 03/18/2005	Date Investigation Completed: 03/24/2005					
Subject Area(s) RESIDENT RIGHTS PHYSICAL PLANTS & SAFETY HAZARDS	Result SUBSTANTIATED SUBSTANTIATED	<u>SOD #</u> 10007137 10007137				
Date Complaint Received: 01/21/2005	Date Investigation Completed: 03/24/2005					
Subject Area(s) PHYSICAL PLANTS & SAFETY HAZARDS	Result SUBSTANTIATED	<u>SOD #</u> 10007137				

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